

Account No.

NOTICE of CHANGE or DISCONTINUANCECheck this box if you have not
received a current set of SUW forms. ☐

LEGAL BUSINESS NAME AND ADDRESS	MAILING NAME AND ADDRESS
CHANGE OUR LEGAL BUSINESS NAME AND ADDRESS TO: (If P.O. Box No., you must include street address)	CHANGE OUR MAILING NAME AND ADDRESS TO:

EFT Filers are required to file a paper annual return.**Use only if you discontinued or made changes to your business. Complete and mail this form to:
Registration Section, Michigan Department of Treasury, Lansing, MI 48922**

- Our correct federal employer identification number is: _____
We changed to a: ____ LLC ____ Ltd. Partnership ____ Sole Proprietorship ____ Corporation ____ Partnership
- We discontinued our business on : _____
Enter the address where you may be reached after the discontinuance or sale of your business on the front.
We sold **part or all** (circle one) of our business on: _____
Enter the buyer's name and address _____
- Please add or delete the following taxes or licenses to my registration. Enter 'A' for add and 'D' for delete.

____ sales tax	____ income tax withholding	____ LPG dealer license
____ use tax	____ motor carrier license	____ gasoline wholesaler's license
____ single business tax	____ diesel dealer license	____ motor fuel tax license or exempt. certificate
		____ tobacco products tax license
- Our corporate name has changed or is different from the one printed on the front.
Enter the correct name on the front.
- Our seasonal business is now open during these months: _____
- Attach any information explaining any other changes you may have had (mergers, etc.).
- These changes are effective for this date: _____

Preparer's Signature	Telephone Number	Date
----------------------	------------------	------